## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10 2 54271

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			17			).		RATE	FEE		RATE	FEE
FOR			NUMBER	FILED	NUME	ER EXTRA		BAȘIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			; 2, mi	nus 20=	*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			J m	inus 3 =	*			X42=		OR	X84=	
MU	TIPLE DEPEN	DENT CLAIM PI	RESENT				Ī	+140=		OR		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	374	OR	L	
CLAIMS AS AMENDED - PART II									911	10.1	OTHER	THAN
		(Column 1)		(Colur	nn 2)	(Column 3)		SMALL ENTITY		OR		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ğ	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	<u> </u>
AME	Independent	*	Minus	***		=		X42=		OR	X84=	1
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=	
	1, 10							TOTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)							IDDIT. FEE	l	1	ADDIT. FEE	<u> </u>
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		×		X\$ 9≈		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CLADA	=		X42=		OR	X84=	
	THOTPHEOL	NIATION OF MIC	DETIFICE DE	CINDEINI	CLAIM		1	+140=		OR	+280=	
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=	
W	Independent	*	Minus	***		=	L				<b></b>	<del> </del> -
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	X42=		OR	X84=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												